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JUL 26 2002

TECHNOLOGY CENTER 2800

To: Examiner Cuong Q. Nguyen **From:** Leslie S. Szivos

Fax: 703-872-9319 **Pages:** 13 Including cover

Phone: **Date:** 7/26/2002

Re: U.S. Patent Appln. No. 09/516,615 **CC:**

IBM Ref: BUR919990190US1

SSMP Docket: 13020

For: METHOD OF FABRICATING A
POLYSILICON CAPACITOR UTILIZING FET AND
BIPOLAR BASE POLYSILICON LAYERS

FINAL REJECTION


• Comments:

1. Amendment Transmittal Letter (in duplicate)
2. Response under 37 C.F.R. §1.116
3. Authorization to Charge Deposit Account
4. Certificate of Transmission by Facsimile dated July 26, 2002

Applicants: Douglas D. Coolbaugh, et al.
Serial No. 09/516,615
Filed: March 1, 2000
For: METHOD OF FABRICATING A POLYSILICON CAPACITOR UTILIZING FET AND
BIPOLAR BASE POLYSILICON LAYERS
Docket: BUR919990190US1 (13020)
Dated: July 26, 2002

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. BUR919990190US1 (13020)				
Applicant(s): Douglas D. Coolbaugh, et al.								
Serial No. 09/516,615	Filing Date March 1, 2000	Examiner Cuong Q. Nguyen		Group Art Unit 2811				
Invention: METHOD OF FABRICATING A POLYSILICON CAPACITOR UTILIZING FET AND BIPOLAR BASE POLYSILICON LAYERS								
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>								
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.								
CLAIMS AS AMENDED								
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE			
TOTAL CLAIMS	7 -	20 =	0 x	\$18.00	\$0.00			
INDEP. CLAIMS	4 -	3 =	1 x	\$84.00	\$84.00			
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00			
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$84.00			
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0456/IBM A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.								
 _____ <i>Signature</i>			Dated: July 26, 2002					
Leslie S. Szivos Registration No. 39,394 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza Garden City, New York 11530 (516) 742-4343			FAX COPY RECEIVED JUL 26 2002 TECHNOLOGY CENTER 2800					
LSS:tt:gmj cc:			<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. </td> </tr> <tr> <td style="text-align: center;"> _____ <i>Signature of Person Mailing Correspondence</i> </td> </tr> <tr> <td style="text-align: center;"> _____ <i>Typed or Printed Name of Person Mailing Correspondence</i> </td> </tr> </table>			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.	_____ <i>Signature of Person Mailing Correspondence</i>	_____ <i>Typed or Printed Name of Person Mailing Correspondence</i>
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